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FACSIMILE TRANSMITTAL FORM

TO: Group Art Unit 3736 DATE: November 7, 2006
Examiner Kristin D. Rogers
COMPANY: United States Patent and Trademark Office

FACSIMILE NO.: 571-273-8300

FROM: Richard J. Godlewski

NO. OF PAGES 10
(including this cover sheet).

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In Re Application of: Hartley et al. Customer No.: 9896
Atty. Docket No.: PA-5340-RFB
Serial No.: 10/645,089 Group Art Unit: 3736
Filed: August 21, 2003 Examiner: Rogers, Kristin D
Title: VARIABLE STIFFNESS ATRAUMATIC GUIDE WIRE

RESPONSE UNDER 37 CFR 1.116
- EXPEDITED PROCEDURE -
EXAMINING GROUP 3736

Please enter and make of record the enclosed response to application Serial No. 10/645,089. The following documents are enclosed with this transmission:

Transmittal of Response to Advisory Action (2 pages)
Petition and Fee For Extension of Time (2 pages)
Response to Advisory Action (3 pages)
Affidavit (2 pages)



Richard J. Godlewski
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Serial No. 10/645,089

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| CERTIFICATION OF FACSIMILE TRANSMISSION | |
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| <p><u>November 7, 2006</u></p> <p>Date</p> | <p><u>Pamm Garwood</u> (Typed or printed name of person signing certification)</p> <p><u>[Signature]</u></p> <p>Signature</p> |

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of: Hartley et al.

Applicant Docket No.: PA-5340-RFB

Group Art Unit: 3736

Serial No.: 10/645,089

Examiner: Rogers, Kristin D

Filed: Filed: August 21, 2003

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MAIL STOP AMENDMENT
COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313

TRANSMITTAL OF RESPONSE TO ADVISORY ACTION

SIR:

Please make of record the following papers relating to the above-identified application:

Petition and Fee For Extension of Time (2 pages)
Response to Advisory Action (3 pages)
Affidavit (2 pages)

FEE FOR CLAIMS

| | Claims Remaining After Amendment | Highest Number Previously Paid For | No. Extra | Rate | Calculations |
|---|-------------------------------------|---------------------------------------|-----------|------------|--------------|
| Total No. of Claims | 11 | 34 | 0 | x \$ 50 = | \$ 0.00 |
| Independent Claims | 1 | 4 | | x \$200 = | \$ 0.00 |
| Multiple Dependent Claim(s), if applicable | | | | + \$360 = | N/A |
| | | | | TOTAL FEE: | \$ 0.00 |

Page 1 of 2

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NOV 07 2006

PAGE 3/10 * RCVD AT 11/7/2006 9:44:03 AM [Eastern Standard Time] * SVR:USPTO-EFAX * DNIS:2738300 * CSID:8123309049 * DURATION (mm-ss):03-24

Serial No. 10/645,089

PATENT

The Commissioner is authorized to charge our Deposit Account No. 13-2528 in the amount of \$120 for payment of the fee for one month extension of time. In the event of improper payment of a required fee, the Commissioner is authorized to charge or to credit Deposit Account No. 13-2528 as required to correct the error.

Please address all correspondence to:

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Respectfully,

Date: Nov. 7, 2006



Attorney for Applicants
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Customer Number

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